



THOMAS L. GARTHWAITE, M.D.
Director and Chief Medical Officer

FRED LEAF
Chief Operating Officer

COUNTY OF LOS ANGELES
DEPARTMENT OF HEALTH SERVICES
313 N. Figueroa, Los Angeles, CA 90012
(213) 240-8101

BOARD OF SUPERVISORS

Gloria Molina
First District

Yvonne Brathwaite Burke
Second District

Zev Yaroslavsky
Third District

Don Knabe
Fourth District

Michael D. Antonovich
Fifth District

February 3, 2005

The Honorable Board of Supervisors
County of Los Angeles
383 Hall of Administration
500 West Temple Street
Los Angeles, California 90012

Dear Supervisors:

**APPROVAL TO ACCEPT NOTICE OF COOPERATIVE AGREEMENT
NO. U62/CCU924449-01 TO SUPPORT A MORBIDITY AND RISK BEHAVIOR
SURVEILLANCE PROJECT (All Districts) (4 Votes)**

IT IS RECOMMENDED THAT YOUR BOARD:

1. Approve and instruct the Director of Health Services, or his designee, to accept Notice of Cooperative Agreement (NCA) No. U62/CCU924449-01 (Exhibit I) from the Federal Centers for Disease Control and Prevention (CDC) to support the Department of Health Services HIV Epidemiology Program's participation in a Morbidity and Risk Behavior Surveillance Project, in the amount of \$428,451, 100% offset by CDC funds, for the period of September 1, 2004 through May 31, 2005.
2. Delegate authority to the Director of Health Services, or his designee, to accept and sign amendments for the period of September 1, 2004 through May 31, 2005, substantially similar to NCA No. U62/CCU924449-01, which do not exceed 25% of the base award amount, subject to review by County Counsel and notification of the Board offices.
3. Delegate authority to the Director of Health Services, or his designee, to accept subsequent Notice of Cooperative Agreements, substantially similar to NCA No. U62/CCU924449-01, to provide funding for the Morbidity and Risk Behavior Surveillance Project, for the remaining three (3) budget-year project periods of June 1, 2005 through May 31, 2006, June 1, 2006 through May 31, 2007, and June 1, 2007 through May 31, 2008, subject to review and approval by County Counsel and notification of the Board offices.
4. Delegate authority to the Director of Health Services, or his designee, to accept and sign amendments, substantially similar to NCA No. U62/CCU924449-01, for the three (3) budget project periods of June 1, 2005 through May 31, 2006, June 1, 2006 through May 31, 2007 and

June 1, 2007 through May 31, 2008, which do not exceed 25% of the base award amount, subject to review and approval by County Counsel and notification of the Board offices.

5. Authorize the Department of Health Services to fill eight (8) new positions, which are: one (1) Epidemiologist, two (2) Epidemiology Analysts, one (1) Public Health Investigator and four (4) Research Analyst I's, 100% offset by CDC funds, in excess of what is provided in the Department of Health Services' staffing ordinance pursuant to Section 6.06.020 of the County Code pending allocation by the Department of Human Resources, 100% offset by CDC funds.
6. Approve the attached appropriation adjustment (Attachment D) in the amount of \$339,000 to cover unbudgeted expenditures for the Morbidity and Risk Behavior Surveillance Project for Fiscal Year (FY) 2004-05.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION:

Approval of the recommended actions will allow the Department of Health Services' (DHS or Department) HIV Epidemiology Program to participate in CDC's national effort to collect a representative data sample which accurately describes HIV-infected individuals and the care they receive. The data will be used to monitor risk behavior trends, medication utilization and adherence, healthcare utilization, etc., which will assist both the nation and the County when planning HIV prevention and healthcare services for persons diagnosed with HIV/AIDS.

FISCAL IMPACT/FINANCING:

The total first year budget is \$428,451, for a nine-month period from September 1, 2004 through May 31, 2005, 100% offset by CDC funds. Funding for years 02 through 04 will be funded for twelve-month periods, respectively or approximately \$571,267, per budget year. An approved appropriation adjustment in the amount of \$339,000 is necessary to cover unbudgeted expenditures for the Morbidity and Risk Behavior Surveillance Project for FY 2004-05. Funding is included in the FY 2005-06 Proposed Budget Request and will be requested in future fiscal years.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS:

Since February 1983, the County has accepted financial assistance from the CDC to support HIV/AIDS surveillance activities.

In June 2004, DHS' HIV Epidemiology Program submitted a research proposal to CDC. On September 17, 2004, CDC notified the Department that funds for a Morbidity and Risk Behavior Surveillance Project were granted for a four-year budget period through May 31, 2008. The grant includes approval and funding for personnel which will be used for HIV outreach to recruit participants needed for the project, as well as, for obtaining blood samples, conducting interviews, and reviewing and maintaining medical records, as required under the project.

Delegation of authority to the Director to accept and sign any amendments to the NCA will facilitate the Department's continued participation in the Morbidity and Risk Behavior Surveillance Project.

The Honorable Board of Supervisors
February 3, 2005
Page 3

Attachments A, B, and C provide additional information. Attachment C is the Grants Management Statement, which the Board instructed all County Departments to include in all Board letter for grant awards exceeding \$100,000.

County Counsel has approved Exhibit I as to form.

CONTRACTING PROCESS:

Grants are not advertised on the L.A. County Online Countywide Website as a contract/business opportunity.

IMPACT ON CURRENT SERVICES (OR PROJECTS):

Approval of the NCA will provide for the support of a Morbidity and Risk Behavior Surveillance Project that will benefit the County when planning HIV prevention and healthcare services for persons diagnosed with HIV/AIDS.

When approved, this Department requires three signed copies of the Board's action.

Respectfully submitted,



Thomas L. Garthwaite, M.D.
Director and Chief Medical Officer

TLG:rdt

Attachment

c: Chief Administrative Officer
County Counsel
Executive Officer, Board of Supervisors
Auditor-Controller
BLETRCD3719.rdt

SUMMARY OF AGREEMENTS1. TYPE OF SERVICE:

HIV Epidemiologic Research Study of Morbidity and Risk Behavior Surveillance program.

2. AGENCY ADDRESS AND CONTACT PERSON:

Centers for Disease Control and Prevention
 Procurement and Grant Office
 2920 Brandywine Road, Room 3000, MS E-15
 Atlanta, Georgia 30341-5539
 Attn: Ms. Ann Cole, Grant Management Specialist (GMS)
 Telephone: (770) 488-2731
 Fax No.: (770) 488-2670
 E-mail: zlr5@cdc.gov

3. TERM:

Year 01 September 1, 2004 - May 31, 2005
 Year 02 June 1, 2005 - May 31, 2006
 Year 03 June 1 2006 - May 31, 2007
 Year 04 June 1, 2007 - May 31, 2008.

4. FINANCIAL INFORMATION:

Total first year budget (i.e., Year 01) is \$428,451, for a nine-month period from September 1, 2004 through May 31, 2005, 100% offset by CDC funds. Funding for years 02 through 04 will be funded for twelve-month durations, or approximately \$571,267, per budget year. An approved appropriation adjustment in the amount of \$339,000 will cover unbudgeted expenditures for the Morbidity and Risk Behavior Surveillance Project for Fiscal Year (FY) 2004-05. Funding is included in the FY 2005-06 Proposed Budget Request and will be requested in future fiscal years.

5. ACCOUNTABLE FOR MONITORING:

Countywide.

6. DESIGNATED ACCOUNTABLE FOR MONITORING AND EVALUATION:

Gordon Bunch, M.A., Director, HIV Epidemiology Program

7. APPROVALS:

Public Health	John F. Schunhoff, Ph.D., Chief of Operations
Contracts & Grants Division:	Cara O'Neill, Chief
County Counsel (approval as to form):	Kelly Auerbach-Hassel, Deputy County Counsel

HIV EPIDEMIOLOGY PROGRAM
Morbidity and Risk Behavior Surveillance Project (PA-04155)
POSITION ALLOCATION REQUEST

Personal Detail

FULL-TIME EQUIVALENT (FTE)

<u>Position Requested:</u>	<u>Number of Position(s):</u>	<u>Percent of Time:</u>
Epidemiologist	1	100%
Epidemiologist Analyst	2	100%
Public Health Investigator	1	100%
Research Analyst 1	4	100%

ATTACHMENT C

**Los Angeles County Chief Administrative Office
Grant Management Statement for Grants Exceeding \$100,000**

Department: Health Services

Grant Project Title and Description

U62/CCU924449-01

Epidemiology Research Study of Morbidity and Risk Behavior Surveillance in Los Angeles County

Funding Agency	Program (Fed. Grant #/State Bill or Code #)	Grant Acceptance Deadline
CDC	U62/CCU924449-01	09/01/04

Total Amount of Grant Funding: \$428,451 County Match Requirements 0.00

Project Period: 4 years Begin Date: 09/01/04 End Date: 05/31/08

Number of Personnel Hired Under this Grant: Full Time 8 Part Time 0

Obligations Imposed on the County When the Grant Expires

Will all personnel hired for this program be informed this is a grant funded program? Yes X No

Will all personnel hired for this program be placed on temporary ("N") items? Yes X No

Is the County obligated to continue this program after the grant expires Yes No X

If the County is not obligated to continue this program after the grant expires, the Department will:

a). Absorb the program cost without reducing other services Yes No X

b). Identify other revenue sources Yes No X

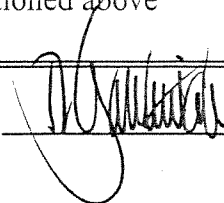
(Describe)

c). Eliminate or reduce, as appropriate, positions/program costs funded by this grant. Yes X No

Impact of additional personnel on existing space: Workstations will have to be remodeled to accommodate additional staff.
None.

Other requirements not mentioned above

Department Head Signature



Date 2/7/05

76R 352M 11/83

COUNTY OF LOS ANGELES
REQUEST FOR APPROPRIATION ADJUSTMENTDEPT'S.
No.

DEPARTMENT OF Health Services

January, 14th 2005

AUDITOR-CONTROLLER.

THE FOLLOWING APPROPRIATION ADJUSTMENT IS DEEMED NECESSARY BY THIS DEPARTMENT. WILL YOU PLEASE REPORT AS TO ACCOUNTING AND AVAILABLE BALANCES AND FORWARD TO THE CHIEF ADMINISTRATIVE OFFICER FOR HIS RECOMMENDATION OR ACTION.

ADJUSTMENT REQUESTED AND REASONS THEREFOR

4
3-VOTE

SOURCES:

Public Health Services
Federal - Other
A01-HS-23450-9001 \$339,000

USES:

Public Health Services
Salaries and Employee Benefits
A01-HS-23450-1000 \$273,000Services and Supplies
A01-HS-23450-2000 66,000~~Fixed Assets~~~~A01-HS-23450-6030 .000~~


TOTAL: \$339,000

TOTAL: \$339,000

Justification:

This adjustment is necessary to recognized additional funding from the Centers for Disease Control and Prevention to support the Department's HIV Epidemiology Program's participation in a Morbidity and Risk Behavior Surveillance Project, per the Notice of Agreement No. U62/CCU924449-01. The funding period is September 1, 2004 through May 31, 2005. There is no impact in County operating subsidy.

EM:lg


Effrain Munoz, Chief

DHS-Controller's Division

CHIEF ADMINISTRATIVE OFFICER'S REPORT

REFERRED TO THE CHIEF
ADMINISTRATIVE OFFICER FOR—

ACTION

✓

RECOMMENDATION

APPROVED AS REQUESTED

AS REVISED

February 8 2005

DAVIDE JAKSON
CHIEF ADMINISTRATIVE OFFICER

AUDITOR-CONTROLLER

BY

Helen Fung

2005

APPROVED (AS REVISED):
BOARD OF SUPERVISORS

19

08/30/2004

93.944

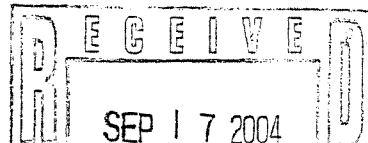
DEPARTMENT OF HEALTH
PUBLIC HEALTH
CENTERS FOR DISEASE CONTROL

EXHIBIT I

NOTICE OF COOPERATIVE AGREEMENT

AUTHORIZATION (LEGISLATION/REGULATION)

42USC 241 318B (42USC 247C-2) HSA 301



04155

3. SUPERSEDES AWARD NOTICE DATED _____
EXCEPT THAT ANY ADDITIONS OR RESTRICTIONS _____
PREVIOUSLY IMPOSED REMAIN IN EFFECT UNLESS SPECIFICALLY RESCINDED.

4. GRANT NO. U62/CCU924449-01

5. ADMINISTRATIVE CODES CCU62

6. PROJECT PERIOD
FROM 09/01/2004 THROUGH 05/31/2008

7. BUDGET PERIOD
FROM 09/01/2004 THROUGH 05/31/2005

8. TITLE OF PROJECT (OR PROGRAM)
MORBIDITY AND RISK BEHAVIOR SURVEILLANCE

9. GRANTEE NAME AND ADDRESS
LOS ANGELES CO. DEPT. OF HEALTH SERVICES
LOS ANGELES CO. DEPT. OF HEALTH SERVICES
600 S. COMMONWEALTH AVENUE, SUITE 1920
LOS ANGELES, CA 90012

10. DIRECTOR OF PROJECT (PROGRAM DIRECTOR/PRINCIPAL INVESTIGATOR)
DR. AMY WOHLM CHIEF EPIDEM/PI
LOS ANGELES CO. DEPT. OF HEALTH SERVICES
600 S. COMMONWEALTH AVENUE, SUITE 1920
LOS ANGELES, CA 90012

11. APPROVED BUDGET (EXCLUDES PHS DIRECT ASSISTANCE)

PHS GRANT FUNDS ONLY
TOTAL PROJECT COSTS INCLUDING GRANT FUNDS AND ALL OTHER FINANCIAL PARTICIPATION

(PLACE NUMERAL ON LINE)

I

1. SALARIES AND WAGES.....\$ 224,076

2. FRINGE BENEFITS.....\$ 89,778

3. TOTAL PERSONNEL COSTS\$ 313,854

4. CONSULTANT COSTS.....\$ 0

5. EQUIPMENT.....\$ 14,000

6. SUPPLIES.....\$ 1,500

7. TRAVEL.....\$ 9,800

8. PATIENT CARE-INPATIENT.....\$ 0

9. PATIENT CARE-OUTPATIENT.....\$ 0

10. ALTERATIONS AND RENOVATIONS.....\$ 0

11. OTHER.....\$ 37,705

12. CONSORTIUM/CONTRACTUAL COSTS.....\$ 2,750

13. TRAINEE RELATED EXPENSES.....\$ 0

14. TRAINEE STIPENDS.....\$ 0

15. TRAINEE TUITION AND FEES.....\$ 0

16. TRAINEE TRAVEL.....\$ 0

17. TOTAL DIRECT COSTS.....\$ 379,609

18. INDIRECT COSTS (0.00 % OF S&W/TADC) \$ 48,842

19. TOTAL APPROVED BUDGET.....\$ 428,451

20. SBIR FEE.....\$ 0

21. FEDERAL SHARE.....\$ 428,451

22. NON-FEDERAL SHARE.....\$ 0

12. AWARD COMPUTATION FOR FINANCIAL ASSISTANCE

A. AMOUNT OF PHS FINANCIAL ASSISTANCE (FROM 11.U).....\$ 428,451

B. LESS UNOBLIGATED BALANCE FROM PRIOR BUDGET PERIODS...\$ 0

C. LESS CUMULATIVE PRIOR AWARD(S) THIS BUDGET PERIOD...\$ 0

D. AMOUNT OF FINANCIAL ASSIST. THIS ACTION \$ 428,451

13. RECOMMENDED FUTURE SUPPORT (SUBJECT TO THE AVAILABILITY OF FUNDS AND SATISFACTORY PROGRESS OF THE PROJECT)

BUDGET YEAR	TOTAL DIRECT COSTS	BUDGET YEAR	TOTAL DIRECT COSTS
A. 2	0	D. 0	0
B. 3	0	E. 0	0
C. 4	0	F. 0	0

14. APPROVED DIRECT ASSISTANCE BUDGET (IN LIEU OF CASH)

A. AMOUNT OF PHS DIRECT ASSISTANCE.....\$ 0

B. LESS UNOBLIGATED BALANCE FROM PRIOR BUDGET PERIODS...\$ 0

C. LESS CUMULATIVE PRIOR AWARDS FROM THIS BUDGET PERIODS \$ 0

D. AMOUNT OF DIRECT ASSISTANCE THIS ACTION \$ 0

15. PROGRAM INCOME SUBJECT TO 45 CFR PART 74, SUBPART F, OR 45 CFR 92.25, SHALL BE USED IN ACCORDANCE WITH ONE OF THE FOLLOWING ALTERNATIVES: (SELECT ONE AND PUT LETTER IN BOX.)

A. DEDUCTION

B. ADDITIONAL COSTS

C. MATCHING

D. OTHER RESEARCH (ADD/DEDUCT OPTION)

E. OTHER (SEE REMARKS)

B

THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, THE PHS ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING:

A. THE GRANT PROGRAM LEGISLATION CITED ABOVE. B. THE GRANT PROGRAM REGULATION CITED ABOVE. C. THIS AWARD NOTICE INCLUDING TERMS AND CONDITIONS, IF ANY, NOTED BELOW UNDER REMARKS. D. PHS GRANTS POLICY STATEMENT INCLUDING ADDENDA IN EFFECT AS OF THE BEGINNING DATE OF THE BUDGET PERIOD. E. 45 CFR PART 74 OR 45 CFR PART 92 AS APPLICABLE. IN THE EVENT THERE ARE CONFLICTING OR OTHERWISE INCONSISTENT POLICIES APPLICABLE TO THE GRANT, THE ABOVE ORDER OF PRECEDENCE SHALL PREVAIL. ACCEPTANCE OF THE GRANT TERMS AND CONDITIONS IS ACKNOWLEDGED BY THE GRANTEE WHEN FUNDS ARE DRAWN OR OTHERWISE OBTAINED FROM THE GRANT PAYMENT SYSTEM.

REMARKS (OTHER TERMS AND CONDITIONS ATTACHED) - YES ☒ NO

SPONSOR: NATIONAL CENTER FOR HIV PREVENTION
*IDC RATE BASE: SEE ATTACHED

PHS GRANTS MANAGEMENT OFFICER: (SIGNATURE)

(NAME-TYPED/PRINT)

(TITLE)

NEALEAN AUSTIN

GRANTS MANAGEMENT OFFICER

7. OBS. CLASS. 41.51

18. CRS.EIN: 1-956000927-C3

19. LIST NO.: C0-218-A04

FY-CAN	DOCUMENT NO.	ADMINISTRATIVE CODE	AMT. ACTION FIN. ASST	AMT. ACTION DIR. ASST
04-11515 04-9213036	CCU924449	CCU62	403,751	0
04-115Y5 04-92103GL	CCU924449	CCU62	24,700	0
2.A				

PHS-5152-1 (CONTINUED)

DATE ISSUED.....: 08/30/2004
GRANT NO.....: U62/CCU924449-01
APPROVAL LIST NO: C0-218-A04

DIRECT ASSISTANCE BUDGET:
=====

PERSONAL SERVICE:	0
TRAVEL.....:	0
VACCINE.....:	0
OTHER SERVICE....:	0

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TERMS AND CONDITIONS THIS AWARD

NOTE 1: INCORPORATION: Program Announcement Number **04155** entitled "HIV AIDS Morbidity and Risk Behavior Surveillance" and the application dated **July 22, 2004**, all applicable regulations and OMB Circulars are made a part of this award by reference.

This award provides funds for the budget year 01 for nine months, September 1, 2004 through May 31, 2005. The subsequent years of the project will have 12 months durations ending May 31, 2008.

Grantee should submit a revised budget in the amount of \$428,451 within 30 days upon receipt of this award. *Most recent indirect cost rate should be submitted with revised budget to CDC Grants Office.*

NOTE 2: INDIRECT COST:

<u>Type</u>	<u>From</u>	<u>To</u>	<u>Rate</u>	<u>Location</u>	<u>Applicable To</u>
<u>Base</u>					

NOTE 3: REPORTING REQUIREMENTS:

- a) Annual Financial Status Report (SF 269 or SF 269A):
The FSR is due to CDC Grants Management Office 90 days after the end of the budget period August 31, 2005, and should include only those funds authorized and actually expended during the budget period covered by the report.
- b) Semi-Annual Progress Reports:
The Year 01 first semi-annual progress report is due February 28, 2005 and will serve as the non-competing continuation application and must contain the following.
 - Current Budget Period Activities Objectives
 - Current Budget Period Financial Progress
 - New Budget Period Program Proposed Activity Objectives
 - Budget
 - Additional Requested Information
 - Measures of Effectiveness
 -

The second semi-annual report will be due 90 days after the project period on August 31, 2005. You are hereby authorized to submit your semi-progress report via electronic transmission. If you should choose this method, please submit it to the attention of your Grants Management Specialist as indicated on the last page of this award. In addition, please furnish a copy of the report to your Project Officer. **DO NOT MAIL COPIES.**

NOTE 4: TECHNICAL REVIEW: N/A

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NOTE 5: HIV PROGRAM REVIEW PANEL REQUIREMENT: The applicant is reminded that all written materials, audiovisual materials, pictorials, questionnaires, survey instruments, websites, educational curricula and other relevant program materials have to be reviewed and approved by an established program review panel. A list of reviewed materials and approval dates must be submitted to the CDC Grants Management Officer.

NOTE 6: CORRESPONDENCE: All correspondence regarding this award must be identified with the award number as shown at the top right of this page.

NOTE 7: PRIOR APPROVAL: "ALL" requests that require the prior approval must bear the signature of an authorized official of the grantee business office as well as that of the principal investigator or program director. Any request received which reflect only one signature will be returned to the grantee unprocessed. Additionally, any requests involving funding issues must include a new proposed budget and a narrative justification of the requested changes.

NOTE 8: PUBLICATIONS: Publications, journal articles, etc. produced under a CDC Cooperative Agreement support project must bear an acknowledgment and disclaimer, as appropriate, such as: This publication (journal article, etc.) was supported by Cooperative Agreement U64CCU924449 from The Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention.

NOTE 9: EQUIPMENT AND PRODUCTS: To the greatest extent practicable, all equipment and products purchased with CDC funds should be American-made.

NOTE 10: ACKNOWLEDGMENT OF FEDERAL SUPPORT: When issuing statements, press releases, requests for proposals, bid solicitations and other documents describing projects or programs funded in whole or in part with Federal money, all awardees receiving Federal funds, including and not limited to State and local governments and recipients of Federal research grants, shall clearly state (1) the percentage of the total costs of the program or project which will be financed with Federal money, (2) the dollar amount of Federal funds for the project or program, and (3) percentage and dollar amount of the total costs of the project or program that will be financed by non-governmental sources.

NOTE 11: INSPECTOR GENERAL: For your information, the United States Department of Health and Human Services Inspector General maintains a toll-free telephone number, 800-368-5779, for receiving information concerning fraud, waste or abuse under grants and cooperative agreements. Such reports are kept confidential, and callers may decline to give their names if they choose to remain anonymous.

NOTE 12: PAYMENT: Payment under this award will be on direct drawdown method. The funds will be obtained directly through the Payment Management System (PMS). PMS is

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the activity.

Key Personnel:

Principal Investigator: Amy Wohl

Business Official: Gordon Bunch

NOTE 15: CDC CONTACT NAMES:

Grants Management Officer (GMO)

Nealean Austin, Grants Management Officer
Centers for Disease Control & Prevention
Procurement and Grants Office (PGO)
2920 Brandywine Road
Atlanta, Georgia 30341-4146
Telephone: (770) 488-2722
Fax: (770) 488-2670
E-mail: naustin@cdc.gov

Grants Management Specialist (GMS)

Ann Cole, Grants Mgmt. Specialist
Centers for Disease Control & Prev.
Procurement and Grants Office (PGO)
2920 Brandywine Road
Atlanta, Georgia 30341-4146
Telephone: (770) 488-2731
Fax: (770) 488-2670
E-mail: zlr5@cdc.gov

CDC PROJECT OFFICER (PO)

Norma Harris, Project Officer
Centers for Disease Control & Prevention (CDC)
Division of HIV/AIDS Prevention
Corporate Square, Bldg. 8 4152, MS, E-45
Atlanta, GA 30333
Telephone: (404) 639-4622
Fax: (404) 639-8640 e-mail: nch2@cdc.gov

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administered by the Division of Payment Management, Program Support Center, DHHS. The PMS will forward the following information to you:

- (1) the DHHS Manual for Recipients Financed Under the Payment Management System (PMS)
- (2) the PMS-272 (Status of Federal Cash) forms
- (3) PMS Contact person that is responsible for your account
- (4) Instructions regarding direct deposit and other payment routes.

PMS correspondence, mailed through the U. S. Postal Service, should be addressed as follows:

Division of Payment Management, FMS/PSC/HHS,
P. O. Box 6021
Rockville, MD 20852.

If a carrier other than the U. S. Postal Service is used, such as United Parcel Service, Federal Express, or other commercial service, the correspondence should be addressed as follows:

Division of Payment Management, FMS/PSC/HHS,
Rockwall Building #1, Suite 700,
11400 Rockville Pike,
Rockville, MD 20852.

To expedite your first payment from this award, attach a copy of Cooperative Agreement to your payment request form.

Note 13: AUDIT FILING COMPLIANCE: An organization that expends \$300,000 (\$500,000 for fiscal years ending after December 31, 2003) or more in a year in Federal awards shall have a single or program-specific audit conducted for that year in accordance with the provisions of **OMB Circular A-133, Audit of States, Local Governments, and Non-Profit Organizations**. It must be completed and a data collection form, and reporting package shall be submitted within the earlier of 30 days after receipt of the auditor's report(s), or nine months after the end of the audit period. The audit report must be sent to: **Federal Audit Clearing House, Bureau of the Census, 1201 East 10th Street, Jacksonville, IN 47132**. Should you have questions regarding the submission or processing of your Single Audit package, contact the Federal Audit Clearinghouse at:

(301) 763-1551

(800) 253-0696

OR email: govs.fac@census.gov

Note 14: KEY PERSONNEL: In accordance with 45 CFR 92.30, Revision of Budget and Program Plans, whenever there is a significant change in the level of participation in the approved project by the key personnel listed below, the grantee must notify the awarding office as soon as the information is known, but no later than 30 days before the expected date of departure or change in the level of participation. A change in the level of participation would exist if a key person were inactive continuously for 3 months or if that individual either withdraws from the project entirely or devotes 25% less effort than originally expected. The grantee is required to notify the awarding office of the proposed alternative plans for conducting

Los Angeles, CA

04155 Morbidity and Risk Behavior Surveillance

Los Angeles, CA
 Grant #: **UG2CCU 924449-01**
 Grantee:
 Budget Period: 9/2004-5/2005
 Request: \$341,734.03
 Recomm: \$428,451.14

Date Reviewed 7/30/2004

Los Angeles, CA
 Abstraction and Interview

Budget:		Requested	Recommended	Restricted	Deferred
Personnel		\$174,950.00	\$224,076.00		
Fringe Benefits	40.07%	\$70,095.00	\$89,778.07		\$0.00
Travel		\$2,600.00	\$9,800.00		\$0.00
Equipment		\$14,000.00	\$14,000.00	\$0.00	\$0.00
Supplies		\$1,500.00	\$1,500.00		\$0.00
Contractual		\$2,750.00	\$2,750.00		\$0.00
Construction		\$0.00	\$0.00		\$0.00
Other		\$37,705.00	\$37,705.00		\$0.00
TOTAL DIRECT CHARGES		\$303,600.00	\$379,609.07	\$0.00	\$0.00
Indirect Charges	21.80%	\$38,134.03	\$48,842.07		\$0.00
TOTAL CHARGES		\$341,734.03	\$428,451.14	\$0.00	\$0.00
TOTAL		\$341,734.03	\$428,451.14	\$0.00	\$0.00

Budgeted amount	\$375,000.00	\$375,000.00
Difference	\$33,265.97	-\$53,451.14

Appendix 1 Budget Modifications Continued

Los Angeles

General Note: The proposed activities for Not in Care, presented in a separate budget, are all disapproved.

- Personnel:
 - Disallow admin assistant III (-\$5612)
 - Disallow accountant (-\$5612)
 - Add 2 DIS positions*9 months, annual salary \$40,000 = \$30,000 each (+\$60,000) for evaluation.
 - Add associated fringe: +\$19,683
- Travel:
 - Add 6 person-trips @ \$1200/each for out of state travel to PI meetings and required trainings.